

Credential Application

Safety and Buildings Division
 201 W. Washington Avenue
 P.O. Box 7082
 Madison WI 53707-7082
 Phone (608) 261-8500
 TDD #: (608) 264-8777
 7:45 a.m. - 4:30 p.m.
www.commerce.state.wi.us

Personal information you provide may be used for secondary purposes [Privacy Law, s. 15.04(1)(m)].

THE CREDENTIAL WILL NOT BE PROCESSED UNLESS YOU :

- A. Sign and date this form;
- B. Submit a complete application with all blanks filled in or marked non-applicable;
- C. Attach the specified fee; and
- D. Attach documents if specified on this application.

Instructions: Please review the pre-printed information in the boxed portions of this application. Clearly print corrections or new information where needed. Please use a color of ink other than black. **Be certain to sign and date the application.** The applicant's social security number is mandatory information. **Make a photocopy of the completed application for your records.**

By signing below, the applicant swears that all information provided on this application is true, accurate and that the credential requirements are met. **Notice: Information collected may be used for participation surveys, eligibility for approvals, law enforcement (including child support and tax delinquency enforcement) purposes and other secondary purposes. The Department may also provide this information to requesters pursuant to Wisconsin's open records law, ss. 19.31-19.39 stats. Social security numbers are required when applying for a license according to Wisconsin Stats. But they may not be disclosed to anyone except other State of Wisconsin governmental agencies.**

Applicant's Signature	Date (mo/day/yr)
Applicant Information	
Applicant's Social Security No:	
Applicant's Name (First, Middle and Last):	
Address No. & Street, or P.O. Box:	
City, Town or Village, State, Zip + 4 Code:	
Country, If Other Than United States:	
Telephone No. (include area code):	
If Available, Fax No. (include area code):	
If Available, Internet Address:	

AUTOMATIC FIRE SPRINKLER SYSTEM TESTER CERTIFICATION

Application and Exam Fee (nonrefundable): \$30.00

class code 7630

Make checks payable to: Safety and Buildings Division. The fee consists of a \$10 application fee and an exam fee of \$20. When the exam is passed, the applicant will be asked to pay a \$90 credential fee. The credential, which will be issued after the exam is passed and the prorated credential fee paid, will be effective for 4 years from the date of issuance. Applications may be hand delivered to 201 W. Washington Ave, Fourth Floor, Madison, WI between the hours of 7:45 a.m. and 4:30 p.m., Monday through Friday.

New Comm 5 Changes affecting your license: Rule revisions effective August 1, 2004, adjusted the length of terms for some Safety and Buildings Division credentials. Fees were not increased nor were continuing education requirements increased, but were adjusted accordingly to reflect the longer license cycle. The total renewal fee and the required continuing education hours changed as the credentials went from two- or three-year terms to four-year terms. For specific code language, see Comm 5.06 (online at <http://www.commerce.state.wi.us/SB/SB-DivCodesListing.html>).

Reason for Credential: Pursuant to ss. 145.15 (4), 145.165 and 145.175, Stats., no person may install, maintain or repair automatic fire sprinkler systems unless the person holds a credential issued by the department as a licensed automatic fire sprinkler contractor, a licensed journeyman sprinkler fitter, a registered automatic fire sprinkler system apprentice, a registered automatic fire sprinkler contractor-maintenance, or a registered automatic fire sprinkler fitter-maintenance. No credential is required if a person is repairing, replacing or maintaining electrical supervisory devices for existing automatic fire sprinkler systems.

No person may conduct the annual activities relative to inspection and testing of an existing automatic fire sprinkler system and components as required by ch. Comm 14 unless the person holds a credential issued by the department as a licensed automatic fire sprinkler contractor, a licensed journeyman sprinkler fitter, a registered automatic fire sprinkler system apprentice, a registered automatic fire sprinkler contractor-maintenance, a registered automatic fire sprinkler fitter-maintenance or a registered automatic fire sprinkler system tester.

Requirements of Credential: A person who holds a credential issued by the department as a registered automatic fire sprinkler system tester may conduct the annual activities relative to inspection and testing of an existing automatic fire sprinkler system and components as required by ch. Comm 14 and NFPA 25. A person who holds the credential shall carry on his or her person the credential issued by the department while performing or conducting the activity or activities permitted under the credential.

Examination: In order to obtain the credential the applicant must obtain a score of at least 70% on an examination. The exam will cover information contained in chapters Comm 5 and 82.41, Wisconsin Administrative Code; and NFPA standards 13 (1999 edition) 14, and 25 (1998 edition) of the National Fire Protection Association. This exam is open book. Copies of current Wisconsin Administrative Code books may be obtained from Document Sales @ (608) 266-3358 or @ (800) 362-7253. NFPA standards may be ordered from the National Fire Protection Association @ (800) 344-3555. The list of adopted NFPA standards is found in Comm 62.3500 and IBC Chapter 35.

To schedule an exam:

- In the table below circle the month you would like to take the exam and the city in which you would like to take the exam. Record a telephone number where you can be reached during the day in case the exam center is filled for that date. The department will attempt to call and offer exams at available sites or dates.
- Submit the **FEE AND THIS APPLICATION** with the month and city circled for the exam to the division **at least 30 days in advance of the exam date chosen**. Note you may wish to keep a copy of this letter for your records.

Exam Name:		This is a 2-hour exam and will be scheduled for the p.m. [] a.m. session (7:15) or [] p.m. session 11:45	
Circle the exam location of your choice below. Then below the location, circle the day you would prefer to take the exam.			
Wausau All Categories	Black River Falls No Soil Testers	Madison All Categories	Pewaukee No Soil Testers
2004 Exam Schedule			
	August 5	August 10	August 17
September 14		September 28	September 21
	October 7	October 12	October 19
November 9		November 16	November 23
		December 14	December 21
2005 Exam Schedule			
LA CROSSE Days Inn and Conference Center 101 Sky Harbour Dr 608-783-1000	GREEN BAY Regency Suites Hotel 333 Main St 920-432-4555	MADISON Sheraton Inn 706 John Nolen Dr 608-251-2300	PEWAUKEE Waukesha County Technical College WCTC 800 Main St

<i>Soil Testers</i>	<i>Soil Testers</i>	<i>Soil Testers</i>	<i>262-695-3474</i> <i>Pat Kraft</i>
	January 4	January 11	January 19 Wednesday
February 8		February 15	February 22
	March 9 Wednesday	March 15	March 22
April 5		April 12	April 19
	May 11 Wednesday	May 24	May 17
June 7		June 22 Wednesday	June 14
	July 12	July 26	July 19
August 9		August 23	August 16
	September 13	September 27	September 20
October 25		October 11	October 18
	November 8	November 22	November 15
		December 13	December 6

Day phone number:

A letter confirming the exact date, time and location will be sent to you.